

Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 2-22-07

Address: Rural Griffin, IN

Case #: 35-26258

1.5 miles south of I64 &

County: Poscy

1.5 miles w of wheeler rd

Type of Laboratory Seizure (check one)

- ☐ Operational Lab
☐ Chemical/Glassware/Equipment (only)
☒ Dumpsite (only)

Seizure Location (check all that apply)

- ☐ Residence ☐ Hotel/Motel
☐ Outbuilding ☒ Open No Structure
☐ Vehicle ☐ Other: _____

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☐ Lithium/Ammonia Reaction(s): _____
☐ Red Phosphorous/Iodine Reaction(s): _____
☒ Flammable Solvents: trash bag
☒ Water Reactive Metal (Lithium): trash bag
☐ Anhydrous Ammonia: _____
☒ Hydrochloric Acid Gas Generator(s): trash bag
☐ Corrosive Acid: _____
☐ Corrosive Base: _____
☐ Other (item and location): _____

Child under age 18 discovered (check one)

- ☐ Yes 2 (number present)
☒ No

*If yes, fax report to Child Protective Services

Investigative Information

- ☐ Ephedrine/Pseudoephedrine Tracking Log
☐ Retail/Merchant Tip
☐ Other: _____

This report is to be faxed to the following agencies that serve the location:

Fire Department: Griffin-Bethel

Fax: mailed

Health Department: Poscy co

Fax: 812 838 8561

Child Protection Service: _____

Fax: _____

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: Trp. Loren Brooks Phone 812 867-2079

** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the clandestine Laboratory Team Leader for retention.